



OFFICE OF PUBLIC GUARDIANSHIP – LEGISLATIVE STUDY

About the Institute

The Washington State Institute for Public Policy (WSIPP) was created by the Washington State Legislature in 1983. The Institute serves as a non-partisan research organization that conducts legislatively-directed evaluations on issues of importance to Washington State. The Institute is governed by a Board of Directors that represents the legislature, governor, and public universities. Assignments come to the Institute directly from legislation or at the request of the Institute's Board. For more information on the Institute, see: www.wsipp.wa.gov

About the Public Guardianship Study

The 2007 Legislature passed Senate Bill 5320, establishing an Office of Public Guardianship within the Administrative Office of the Courts. The office is intended to “promote the availability of guardianship services for individuals who need them and for whom adequate services may otherwise be unavailable.” The Office of Public Guardianship will contract with individuals and organizations to provide guardianship services where there is no one else qualified, willing and able to serve. To be eligible for a public guardian, individuals must have incomes under 200 percent of the federal poverty level or be receiving long-term care services through DSHS.

The initial implementation of public guardianship services will occur on a pilot basis in five counties (Clallam, Grays Harbor, Okanogan, Pierce and Spokane). The Legislature directed the Washington State Institute for Public Policy (Institute) to “analyze the costs and off-setting savings to the state from the delivery of public guardianship services”. An initial report is due in April 2009, with a final evaluation report to be completed by April 2011.

Background

Approximately 2,500 guardianship petitions are filed in Washington State every year. Guardianship cases are completed (and a guardian is appointed) in about 1,600 cases every year. In these cases, incapacitated individuals had a friend or family member willing to serve as a guardian advocate, or had the financial means (or benefit eligibility) to pay for a guardian. Public guardians are meant to serve individuals with incomes under 200 percent of the federal poverty level who cannot afford a professional guardian.

The Office of Public Guardianship will contract with professional guardians to serve individuals that have been found incapacitated by the court and cannot afford a guardian. According to RCW 11.88.010, individuals can be found incapacitated when they are at “significant risk of personal harm based upon a demonstrated inability to adequately provide for nutrition, health, housing or physical safety”, or the individual is at “significant risk of financial harm based upon a demonstrated inability to adequately manage property or financial affairs”. The statute also notes that, “a determination of incapacity is a legal, not a medical decision, based upon a demonstration of management insufficiencies over time in the area of person or estate.”

Evaluation Plan - Phase One: Implementation Review and Background of Program Participants

The first evaluation report (due April 2009) will analyze the background and characteristics of clients receiving services through the Office of Public Guardianship. Public guardians contracting with OPG are required to complete the following documents for each client:

- Intake form and initial assessment
- Guardianship care/service plan
- Staff time logs
- Change in incapacitated person condition and ability
- Monthly status reports

The content of these reporting documents will be determined in early 2008. Similar assessments, however, have focused on the ward's status in the following areas: 1) health, 2) nutrition, 3) functioning, 4) financial well-being, 5) social interaction, and 6) living environment. The Institute's first evaluation report will analyze types of cases that are assigned to public guardians. Factors such as living arrangement (stable or transitioning), nature of incapacity (physical/mental), health status and guardianship needs will influence the expected outcomes for public guardianship clients. The composition of a public guardian's caseload also plays a role in the number of clients served by each guardian and the individual approach. Before finalizing a strategy for determining the cost-effectiveness of public guardianship, the Institute will aim to understand the workload issues and characteristics of the client population.

In addition to the review of program documents described above, the Institute will also rely on administrative data to provide a detailed background on the characteristics and experiences of persons served by public guardians. This historical information will be subject to the prior approval of the DSHS Human Research Review Board (HRRB) and may include:

- Public assistance – Receipt of income assistance (TANF, SSI, GA) and/or food stamps
- Prior hospitalizations – diagnoses, number/type of admissions, discharge status, prescriptions
- Mental health services received – commitment and detention proceedings, outpatient services, psychiatric hospitalizations
- Long-term care services – in home care, assisted living (adult family home, nursing home), payment type, level of care
- Adult protective services – type of referrals, investigation finding, services received
- Court records – review of legal documents associated with case, type of guardianship (person/estate, full/limited)

An analysis of this data will provide a thorough profile of individuals served by public guardians. The profile will help determine which key informants to survey in phase two of the evaluation and will also guide the content and structure of those surveys.

Evaluation Plan - Phase Two: Cost Savings and Program Impacts

The final report on the cost effectiveness of Public Guardianship will be complete by April 2011. As noted previously, the structure and approach for this final evaluation report will depend in part on findings from the earlier phase of the study. It is expected, however, that the final study will include three components:

1. Measures of change

Individuals serving as public guardians will complete an initial assessment of the client in their care, followed by regular assessments which monitor change in client well-being. Any improvements or deterioration in a client's status will not necessarily be associated with the presence of a public guardian. Declining health status resulting from age or disease, and prior services, treatments, or supports can all affect the future well-being of an incapacitated individual. Monitoring changes in a client's status, however, will give an indication about the types of cases where successes or setbacks are seen. For example, do clients who move to less restrictive living environments experience changes in mental health? For clients whose health stabilizes, do other spheres (such as financial or daily living activities) improve after receiving guardianship services? How much time do Public Guardians spend with different types of clients and how is this effort related to client functioning? Without the ability to assess changes in a similar, but unserved population, we cannot conclude that the assignment of a public guardian resulted in observed changes. As the program develops, however, it will be necessary to better understand the types of clients served by guardians and how their needs change over time.

2. Cost survey of public guardians

The Institute's central assignment in this evaluation is to "analyze the costs and off-setting savings to the state from the delivery of public guardianship services". Measures of cost savings will be finalized after a more detailed profile of clients served by public guardians has been developed. We will conduct a survey of public guardians and analyze administrative records to determine actions or activities that may have resulted in potential cost savings. The activities may include:

- Discharge from psychiatric hospital
- Moving client from a state hospital to an assisted living facility or nursing home
- Medical cost reductions (change in number and type of hospital admissions, change in Medicaid reimbursements)
- Eligibility for income assistance or medical programs
- Recovering assets from a client who was being exploited

In addition to examining administrative records for public guardian clients in the program counties, the study will attempt to gather cost information for a potential comparison group. The most likely comparison group includes individuals receiving an indirect subsidy for guardianship services through Medicaid funds. In Washington State, up to \$175 per month may be paid towards guardianship services for individuals that are Medicaid eligible. By comparing care decisions for individuals with a public guardian to other incapacitated state-assisted clients, we may have a better picture of the costs and benefits of both approaches.